Statement-II

STRENGTHENING OF PRIMARY HEALTH CARE
INTERVENTIONS ENVISAGED IN
NATIONAL POPULATION POLICY—2000

1. DIVERSE HEALTH CARE PROVIDERS

a) Accreding Private Medical Practitioners and assigning them to defined beneficiary groups to provide Reproductive and Child Health Care Services.

b) Revival of the system of licenced medical practitioners who after certification from the Indian Medical Association could provide specified clinical services.

c) Involve the non-medical fraternity in consulting and advocacy to promote National Family Welfare effort.

2. Collaboration with and commitments from Non Governmental Organisation and the Private sector.

3. Collaboration with and commitment from Industry. The areas identified for collaboration are Management Information System, Information Education, and Communication. Help promote transportation of patients to and from remote and inaccessible areas, provision of Reproductive and Child Health Care to its employees, creation of a National Network of health centres etc.

4. Mainstreaming Indian System of Medicine and Homoeopathy.

a) Provide training to ISMH Doctors in RCH Programme.

b) Utilise the service of ISMH Doctors to fill in gaps in manpower in health infrastructure.

National Health Programme on Blindness In Andhra Pradesh

3956. DR. DASARI NARAYANA RAO: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether Government are implementing National Health Programme on Blindness in Andhra Pradesh;

(b) if so, the details therof; and

(c) the steps Government have taken to increase public awareness regarding blindness in that State?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI A. RAJA): (a) Yes, Sir.

(b) National Programme for Control of Blindness is being implemented throughout the country including Andhra Pradesh since 1976. Andhra Pradesh was also included under the World Bank assisted Cataract Blindness Control Project since 1994-95.

(c) Steps taken to increase public awareness regarding blindness are:—

1. Eye care messages through mass media; regional television and All India Radio;
2. House to house screening of blind persons through village based linked workers and motivating them for utilizing services;
3. Promoting donation of eyes after death through pledging;
4. School eye screening programme for promoting eye care; identification and treatment of children with refractive errors.

Action taken under Pre-Natal Diagnostic Techniques (Regulation and Prevention of Misuse) Act, 1994

3957. SHRI ANANTRAY DEVSHANKER DAVE: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether the Pre-natal Diagnostic Techniques (Regulation and Prevention of Misuse) Act, 1994 has been enacted;

(b) if so, the number of cases for violation of the said Act registered for the last three years; and

(c) the action taken against the disclosure of the sex of the foetus?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI A. RAJA): (a) Yes, Sir. The Pre-natal Diagnostic Techniques (Regulation and Prevention of